Data Elements (HL7 Data Transmission Guide - Appendix D)

Admission Type Type' of admission. See standard code table. (e.g., Direct = "1", Transfer INS = "3") ADA Code American Dental Association code that designates the type of dental services provided during this erocounter. Nationally recompised standard code set. For In Table ADA Code ADA Code The Code The Code Individual Cod	Element	Description	HL7 Element
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Alcohol-related = '2'; Battered-child = '3'; etc.) Cause of Injury ICD-9 E code for the cause of the injury. (Only used if diagnosis code is between 800 and 999.9, meaning injury.) Nationally recognized standard code set. Preferred format is to include the dot. Chart Facility Code Code to designate the facility where this chart is located. See standard code table. PID-4-1 ZRC-6-1 Chart Number A patient's health record number (HRN) at the specified facility. PID-4-2 ZRC-7-1 Chart Status Code Status of the specified chart at the local facility. ('A' = Active, 'I' = Inactive, 'D' = Deleted.) ZRC-8-1 CHS Cost For CHS visits, total cost information. Preferred format is 999999.99.			ZRB-5-1
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CHS Cost For CHS visits, total cost information. Preferred format is 999999.99.			ZRC-7-1
·	Chart Status Code	Status of the specified chart at the local facility. ('A' = Active, 'I' = Inactive, 'D' = Deleted.)	ZRC-8-1
City City or town portion of this patient's mailing address. PID-11-3	CHS Cost	For CHS visits, total cost information. Preferred format is 999999.99.	ZV1-17-1
	City	City or town portion of this patient's mailing address.	PID-11-3

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Element	Description	HL7 Element
Clinic Code	The clinic in which this visit occurred. See standard code table. (e.g., General = '1'; Internal Medicine = '13'; Nephrology = '49'; etc.)	ZV1-3-1
Clinical Measure Code	Code describing the type of measurement that is being captured. ('1' = Height, '2' = Weight, '4' = Blood Pressure.)	OBX-MSR-3-1
Clinical Measure Result Value	This field will be used for Blood Pressure, Height, & Weight. BP to be reported in ###/## format, height to be output in inches in ##.# format, weight in pounds in ###.# format.	OBX-MSR-5-1
Community of Residence Code	Code for the State/County/Community of Residence of the patient. See standard code table.	ZP2-22-1
Coverage Type Code	Type of third party coverage for which the patient is eligible.	IN1-47-1
CPT Quantity	Number of CPT codes.	OBX-CPT-5-1
Data Entry Creation Date (character format)	Date data entry first "touched" the visit. Character field formatted as CCYYMMDD.	ZV1-1-1
Date Moved To Community (character format	Date when the patient first moved to this community of residence. Character field formatted as CCYYMMDD.	ZP2-19-1
Date of Birth (character format)	Patient's Date of Birth. Character field formatted as CCYYMMDD.	PID-7-1
Date of Death (character format)	Patient's Date of Death. Character field formatted as CCYYMMDD.	PID-29-1
Date of Last Update	Date last modified by the local registration/encounter system.	ZV1-4-1
		ZRB-1-1
		ZRD-1-1
		ZRL-1-1
		ZRC-1-1
		ZIN-1-1
Day of Week	Day Of Week the encounter/admission occurred. ('0' = Sunday, '1' = Monday, etc.)	ZV1-31-1
Dental Cost	Dental Total Cost rounded to the nearest dollar.	ZDN-6-1
Dental Delivery Code	Used exclusively by dental to indicate if the visit was Direct or Contract. ('D' or 'K')	ZDN-5-1
Dental Operative Site	Code used to identify the tooth, range of teeth, or other location for which the ADA procedure was performed. (e.g., Upper right 2nd permanent molar = '2', Upper right 2nd primary molar = 'A'.)	ZDP-2-1
Dentist's SSN	SSN for the dental provider. (format 99999999, no dashes.)	ZDN-7-1
Diagnosis Code (Purpose of Visit)	Purpose of Visit ICD-9 diagnostic code. The diagnosis whose Diagnosis Sequence Number = '1' is considered the primary diagnosis. Nationally recognized standard code set. Preferred format is to include the dot.	DG1-3-1
Diagnosis Sequence Number	Sequence number of the diagnosis for which the CPT procedure was performed, if applicable. It is used to link this PROCEDURE record with the appropriate DX record.	ZPR-9-1
Discharge Date (character format)	Inpatient: date patient discharged. Outpatient: null. Character field formatted as CCYYMMDD.	PV1-45-1
Discharge Service Code	Code for the service from which the patient was discharged. See standard code table. (e.g., Dental = '1', ENT = '2'.)	ZV1-36-1
Discharge Type Code	Identifies how a patient was discharged from an inpatient (i.e., hospital) visit.	ZV1-37-1
Disposition On ER Visits	The disposition code, if this is an ER visit. See standard code table.	PV1-36-1
DM Nutrition Education Flag	Was Diabetes Mellitus education given to the patient? (Y/N)	ZEN-13-1
Education Code	Code that specifies the topic of education provided during this encounter. See standard code table. (e.g., Child Health Newborn Parenting = 'CHN-PA', Diabetes Mellitus Exercise = 'DM-EX', etc.)	OBX-PED-3-1
Education Understanding	Education - patient's level of understanding ('1' For Poor; '2' For Fair; '3' For Good; '4' For Group-No Assessment; '5' For Refused.)	OBX-PED-5-1
Eligibility End Date (character format)	For Medicaid and Medicare, the eligibility end date; for private insurance, the expiration date. Character field formatted as CCYYMMDD.	IN1-13-1
Eligibility Start Date (character format)	Date that eligibility for the specific type of coverage begins. For Medicaid and Medicare, the eligibility date; for private insurance, the effective date. Character field formatted as CCYYMMDD.	IN1-12-1
Eligibility State Code	State where a patient is eligible for Medicaid.	IN1-15-1

Element	Description	HL7 Element
Encounter Delete Flag	Flag received from the local system that indicates that this encounter was deleted from the local system.	ZV1-25-1
Encounter Export Date	Date this "snapshot" of the local encounter record was exported.	ZV1-26-1
Evaluation and Management CPT Code	CPT code from evaluation and management field of visit file. Nationally recognized standard code set.	ZV1-34-1
Exam IHS Code	Exam that was performed on the patient during this encounter. See standard code table. (e.g., General exam = '1', Ear exam = '2', Diabetic eye exam = '3'.)	OBX-XAM-3-1
Export Log Number	Control number assigned to the export at the local level, that allows us to track the data back to the facility.	ZHS-3-1
Father's First Name	Father's First Name.	ZP2-31-2
Father's Last Name	Father's Last Name.	ZP2-31-1
Father's Middle Name	Father's Middle Name.	ZP2-31-3
Fecal Occult Blood Lab Flag	Was a fecal occult blood test performed during this encounter? (Y/N)	ZEN-24-1
First Modified Date i.e., Export Begin Date (character format)	Begin Date of the date range used by the site to export data to the warehouse. Character field formatted as CCYYMMDD.	ZHS-1-1
First Name	First name of the patient; could also be an alias.	PID-5-2
		ZRL-6-2
Full Name	Patient's name prior to parsing into first, middle, last, etc. The format is specific to the local system.	ZRD-5-1
Gender	Sex of Patient as provided by the patient's registration information.	PID-8-1
Glucose Value	Result value for a glucose test obtained during this encounter.	ZEN-16-1
HDL Cholesterol Test Flag	Was an HDL cholesterol test performed during this encounter? (Y/N)	ZEN-17-1
HDL Cholesterol Value	Result value for an HDL cholesterol test obtained during this encounter.	ZEN-18-1
Health Factor Category	Health factor category. (e.g., 'Tobacco'.)	OBX-HF-3-1
Health Factor Code	Health Factor code.	OBX-HF-3-2
Health Factor Name	Name of Health Factor. (e.g., 'previous smoker'.)	OBX-HF-3-3
Health Factory Category Code	Health factor category code.	OBX-HF-4-1
HGB A1C Value	This HgbA1C lab test will be stored in the LAB_TEST table with LOINC code 4548-4.	ZEN-14-1
HL7 Immunization Code	Proprietary subset of HL7 used by IHS beginning with version 7.0 of the RPMS Immunization Package. This was replaced in version 8.0 with the complete HL7 CVX code list.	ZIM-4-1
HTN Ever Documented Flag	Has this patient ever had Hypertension documented as a "Purpose of a Visit?" (Y/N)	ZEN-4-1
HTN Last Documented (character format)	Date Hypertension (HTN) was last documented as a Purpose Of Visit (POV), if ever. Character field formatted as CCYYMMDD.	ZEN-5-1
ICD9 Procedure Code	ICD-9 procedure code for the specified procedure. Nationally recognized standard code set. Preferred format is to include the dot.	PR1-3-1
IHS Immunization Code	Proprietary code for immunizations used by IHS prior to version 7.0 of the RPMS Immunization Package.	ZIM-5-1
Immunization Dose Number Code	The dose in an immunization series that was provided on this encounter. (Some immunizations require multiple doses over a period of time. Not necessarily a number.)	ZIM-6-1
Immunization Formulation Code	HL7's CVX code for the vaccine formulation. See standard code table. (e.g., DPT = '1', Measles and rubella virus vaccine = '4'.)	ZIM-2-1
Immunization Manufacturer Code	HL7's MVX code for the vaccine's manufacturer See standard code table. (e.g., Abbott Laboratories = 'AB', Aventis Behring L.L.C. = 'AVB'.)	ZIM-3-1
Infection Flag	Was this procedure related to an infection. (Y/N)	ZPR-5-1
Insurance Category Code	Type of Eligibility ('MCD' = Medicaid, 'MCR' = Medicare, 'RRE' = Railroad Retirement, 'PVT' = Private Insurance).	IN1-4-1
Insurer EIN	Insurer's Employer Identification Number.	IN1-3-1
Insurer Name	Usually the name of the insurance company.	IN1-4-2

Element	Description	HL7 Element
Lab Result (character)	Lab result (character).	OBX-LAB-5-1
Lab Test Name	Lab test name as stored in the local system.	OBX-LAB-3-2
Last Menstrual Period (character format)	Last known menstrual period on file. (Note: this may not be current. Check against date noted.) Format: CCYYMMDD	ZEN-6-1
Last Modified Date i.e., Export End Date (character format)	End Date of the date range used by the site to export data to the warehouse. Character field formatted as CCYYMMDD.	ZHS-2-1
Last Name	Last name of the patient; could also be an alias.	PID-5-1
		ZRL-6-1
LDL Cholesterol Test Flag	Was an LDL cholesterol test performed during this encounter? (Y/N)	ZEN-19-1
LDL Cholesterol Value	Result value for an LDL cholesterol test obtained during this encounter.	ZEN-20-1
Length of Education	Length, in minutes, of the patient education provided for this specified topic.	OBX-PED-13-1
Length of Stay	Number of days the patient was in the hospital.	ZV1-38-1
LMP Noted (character format)	Date the last menstrual period on file was noted. Format: CCYYMMDD	ZEN-7-1
Local SSN Verification Code	Field used by local facilities if they use the SSA information sent them to update their local databases. If they update their records to a "verified" code, they can use this field to note it.	ZP2-11-1
Location of Encounter	Facility code for the location where the visit took place.	PV1-3-1
LOINC Code	Logical Observation Identifiers Names and Codes (LOINC). Nationally recognized standard code set to identify the lab test.	OBX-LAB-3-1
Mailing Address Street 1	First line of the street address portion of this patient's mailing address, P.O. box, or rural route address of the patient.	PID-11-1
Mailing Address Street 2	Second line of the street address portion of this patient's mailing address, P.O. box, or rural route address of the patient.	PID-11-2
Medication Name	Name of the medication as stored in the local system.	ZMD-2-1
Medication NDC Code	National Drug Code (NDC) for this medication as stored in the local system. Nationally recognized standard code set	ZMD-3-1
Medication Quantity	Quantity of medicine dispensed (e.g., number of pills, milliliters of a liquid preparation, grams of a topical cream, etc.). Entry is a number, units (# of pills, mls, mgs, etc.) are implicit in the NDC code. (Formatted as a number up to 9999999.999.)	ZMD-5-1
Microalbuminuria Flag	Was an Microalbuminuria test performed during this encounter (Y/N)?	ZEN-11-1
Microalbuminuria Value	Value of the Microalbuminuria test.	ZEN-12-1
Middle Name	Middle name of the patient; could also be an alias.	PID-5-3
		ZRL-6-3
Midwifery Flag	A flag to indicate if the provider is a midwife.	ZVP-7-1
Mother's Maiden First Name	Mother's First Name.	ZP2-35-2
Mother's Maiden Last Name	Mother's Maiden Last Name.	ZP2-35-1
Mother's Maiden Middle Name	Mother's Middle Name.	ZP2-35-3
Name of Exporting Box's Site	Name of Exporting Box's Site.	BHS-10-1
Name Suffix	Name suffix, such as Sr., Jr., III, etc.	ZRD-7-1
		ZRL-6-4
Number of Consults	Number of consults during an inpatient stay.	ZV1-12-1
Number of Lab Tests Done	Total number of lab tests that were performed for this visit.	ZEN-25-1
Number of PCC Visits	The total number of pcc visits that are contained in this export.	ZTS-1-1
Pap Lab Test Flag	Was a Pap test performed during this encounter? (Y/N)	ZEN-15-1
PCC Visit Errors (RPMS systems only)	Number of PCC visits skipped (not exported) due to error.	ZTS-3-1

Element	Description	HL7 Element
PCC Visits Skipped (RPMS systems only)	Total number of PCC visits skipped (not exported).	ZTS-2-1
PHN Activity Code	Activity Code used for reporting PHN visits. ('01' = Home, '02' = Other, '03' = Patient not found.)	ZPN-2-1
PHN Activity Minutes	Total number of minutes to complete the activity.	ZV1-22-1
PHN Intervention Level ('P' = primary, 'S' = secondary, 'T' = tertiary)	Level of Intervention code used of Public Health Nursing reporting.	ZPN-3-1
PHN Travel Minutes	Travel Time recorded in minutes.	ZV1-23-1
Place of Injury	Code for the place of injury. (Only used if ICD-9 diagnosis code is between 800 and 999.9, signifying an injury.) See standard code table. (e.g., Home-Inside = 'A'; Home-Outside = 'B'; Farm = 'C'; etc.)	ZDX-7-1
Plan Name	Plan Name for Medicaid Coverage. Applicable Only for Medicaid.	IN1-15-2
Policy Holder's First Name	First name of the insurance policy holder.	IN1-16-2
Policy Holder's Last Name	Last name of the Insurance Policy holder.	IN1-16-1
Policy Holder's Middle Name	Middle name of the insurance policy holder.	IN1-16-3
Policy Number	Policy Number.	IN1-49-1
Policy Prefix/Suffix	Policy suffix for Medicare, or prefix for Railroad Retirement.	IN1-49-2
Prescription quantity	Number of prescriptions written for this patient/visit.	ZV1-29-1
Procedure Date (character format)	Date the procedure took place. (CCYYMMDD format.)	PR1-5-1
Provider Affiliation Code	The affiliation of the provider. See standard code table. (e.g., IHS = '1'; Contract = '2'; Tribal = '3'; etc.)	ZVP-2-1
		PR1-11-1
Provider Class X12 Code	The HIPAA "provider classification" code, a more specific service or occupation related to the Provider Type. For example, the Classification for Allopathic & Osteopathic Physicians is based upon the General Specialty Certificates as issued by the appropriate national boards.	ZVP-4-1
	Specialty Certificates as issued by the appropriate flational boards.	ZPR-10-1
Provider Discipline Code	The discipline of the provider. See standard code table. (e.g., Physician = '0', Physician Assistant = '11'.	ZVP-2-2
		PR1-11-2
Provider Local Code	Code used at the site to identify the provider. Usually, but not always the provider's initials.	ZVP-3-1
Provider Spec X12 Code	HIPAA "provider specialization" code, a more specialized area of the Classification in which a provider chooses to practice or make services available. For example, the Area of Specialization for provider type Allopathic & Osteopathic Physicians is based upon the Subspecialty Certificates as issued by the appropriate national boards.	ZVP-5-1
	appropriate national boards.	ZPR-11-1
Provider Type X12 Code	The HIPAA "provider type" code, a major grouping of service(s) or occupation(s) of health care providers. For example: Allopathic & Osteopathic Physicians, Dental Providers, Hospitals, etc. See standard code table.	ZVP-6-1
		ZPR-12-1
PSA Lab Test Flag	Was a Prostate Specific Antigen test performed during this encounter? (Y/N)	ZEN-23-1
Purchase Order Number	Number assigned to the specific purchase order for contract services. Contains 4 components: 00 0 00 00000. 1st component = two digits comprised of '0' + last digit of fiscal year being charged for the services (i.e. 1998 = '08'). 2nd component = single digit alpha code identifying the area (REF.AREA. REGION_CD). 3rd component = two digit fiscal code identifying the facility being charged for the services (the standard location code used in the Fiscal Accounting System). 4th component = firve digits signifying a sequential number for the documents to be charged to each issuing facility, beginning with 0001 each year and continuing sequentially.	ZV1-28-1
Range Lower Limit	Lower limit for the normal reference range of the associated lab test.	OBX-LAB-7-1
Range Upper Limit	Upper limit for the normal reference range of the associated lab test.	OBX-LAB-7-2

Element	Description	HL7 Element
Registration Record Create Date (character format)	Date that the registration record was created on the local system. Character field formatted as CCYYMMDD.	ZP2-1-1
Registration Status Code ('A' = active,' I' = inactive)	Status of a patient registration record and all of its components, i.e. demographic states, charts, aliases, and insurance eligibilities. (Examples why inactive: death of patient, or registration consolidated with another for same patient.)	ZRD-8-1
Relationship to Insured	Patient's relationship to the insured - applicable only for Medicaid and Private insurance. This will be the applicable code for "relationship to insured" used by UB-92, a nationally recognized standard for electronic claims submission.	IN1-17-1
Sequence Number	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	ZVP-1-1
	und 30 on.	PR1-1-1
		OBX-CPT-1-1
		ZDN-1-1
		ZDP-1-1
		DG1-1-1
		OBX-XAM-1-1
		OBX-PED-1-1
		ZIM-1-1
		OBX-LAB-1-1
		OBX-MSR-1-1
		OBX-SKT-1-1
		ZMD-1-1
		OBX-HF-1-1
Service / Admission Date (character format)	Outpatient: date of service. Inpatient: admission date. Character field formatted as CCYYMMDD.	PV1-44-1
Service Category Code	Service category for this encounter. See standard code table. (e.g., Hospital = 'H', Chart Review. = 'C'.)	ZV1-33-1
Service Eligibility Code	Code that specifies the types of services for which this patient was eligible. See standard code table. (e. g., CHS & Direct = 'C', Ineligible = 'I', Direct only = 'D', Pending Verification = 'P'. Note: Native Americans cannot be coded "ineligible".)	ZP2-34-1
Service Level Code	Code that specifies the Level of Service for this encounter. See standard code table. (e.g., Brief = 'B', Limited = 'L', Comprehensive = 'C'.)	ZV1-6-1
Service Type Code	A code that specifies the "Type of Visit" for this encounter. See standard code table. (e.g., IHS = '.I', Contract = 'C', Tribe-Non 638/Non-Compact = 'T', Other = 'O'. "Other" is used for anything usually done outside of IHS. For example, if a visit is recorded for a surgical procedure done historically or at a facility outside of IHS, then "Other" is used.	ZV1-32-1
Skin Test Code	Code for a skin test performed during this visit. See standard code table. (e.g., '20' = Tine, '21' = ppd, '22' = Schick, '23' = Cocci)	OBX-SKT-3-1
Skin Test Reading	Numeric measurement in mm of a skin test measured during this visit.	OBX-SKT-5-1
Skin Test Result Code	Code for a skin test result, reading performed during this visit. See standard code table. (e.g., 'P' = Positive; 'N' = Negative; 'D' = Doubtful; 'O' = No Take.)	OBX-SKT-5-2
Skipped Demo Patients (RPMS systems only)	Number of PCC visits not exported because the patient's name was 'DEMO, PATIENT'.	ZTS-4-1
Social Security Number Pseudo-code	Field used by the load process to determine if the SSN is actually a pseudo-ssn assigned by the facility.	PID-19-1
Source File Export Date (character format)	Date the export was run at the facility. Character field formatted as CCYYMMDD.	BHS-7-1
Source File Record Quantity	Total number of records contained in the source file, i.e., the file the IE receives from the facility. This should be the number of HL7 messages.	ZTS-5-1
State Code	Two digit state code for this patient's mailing address.	PID-11-4
Static ASUFAC of Exporting Box	Code used to identify the actual machine from where the data originated.	BHS-4-1

Element	Description	HL7 Element
Time of Day	Time of day the encounter/admission occurred.	ZV1-30-1
Title	Title of the patient, such as Mr., Ms., Mrs., Miss, etc.	ZRD-6-1
		ZRL-6-5
Tooth Surface	Tooth surface.	ZDP-3-1
Transfer Facility Code	Code that is used to specify the facility to which the patient was transferred. The facility code is from a standard code table.	PV1-37-1
Tribe Code	Code for the Indian tribe of the patient. See standard code table. (e.g., Aluet = '002', Eskimo = '003', Apache = '004'.)	ZP2-15-1
Triglyceride Value	Result value for a triglyceride test obtained during this encounter	ZEN-22-1
Tryglyceride Test Flag	Was a triglyceride test performed during this encounter? (Y/N)	ZEN-21-1
Unique Encounter ID	Unique encounter (visit) record ID generated by the source system.	PV1-19-1
Unique Registration Code	Unique registration record ID generated by the source system. (It is unique by registration record, not necessarily by patient if a given patient has more than one registration record at the same facility or different facilities.)	PID-3-2
Unique Registration Database ID	Code that identifies the database from which the data originated. Its main function is to be used as an audit trail in the event we need to troubleshoot some data. It is a character ID agreed upon between the sending application and DW.	PID-3-1
Unit of Measure	Unit of measure for the lab result.	OBX-LAB-6-1
Urine Protein Test Flag	Was a urine protein test performed during this encounter? (Y/N)	ZEN-9-1
Urine Protein Value	Result value for a urine protein test obtained during this encounter.	ZEN-10-1
VA Drug Class Code	Code representing the VA Drug Class. This code is assigned by the local system. See standard code table. (e.g., Penicillin G-related penicillins = 'AM051', Opioid antagonist analgesics = 'CN102'.)	ZMD-4-1
Vendor Type Code	Vendor Type Code: a vendor is a provider that is contracted by IHS. We only receive vendor type code for contract visits; there should only be one per visit, so it will be stored with the visit.	ZV1-21-1
Veteran Flag	Identifies a person who has previously served in the US Military. Veterans generally receive special veteran's assistance for medical bills. (Y/N). Note: This flag indicates if the patient is a veteran. It is NOT intended to identify all patients who are eligible for veteran's benefits.	PID-27-1
Zip Code	Zip code for this patient's mailing address. In RPMS exports, this field will also contain the 4 char zip code extension; NPIRS and the Data Warehouse separate and then correctly populate zip code and zip code extension (first 5 and last 4 chars of data sent). All other exports are expected to send the 4-char zip code extension separately, if available.	PID-11-5